In re application of

Geoffrey B. Rhoads

Confirmation No. 8458

Application No. 10/601,343

Filed: June 20, 2003

For: RING OPTICAL INTERFEROMETER

Group Art Unit: 2878

Examiner:

Date: November 5, 2003

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:

COMMISSIONER FOR PATENTS PO BOX 1450

ALEXANDRIA, VA 22313-1450

November 5, 200

Connie English
Typed Name

PRELIMINARY AMENDMENT

TO THE COMMISSIONER FOR PATENTS:

Please amend the above-identified patent application as follows.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks begin on page 4 of this paper.

NOV 1 0 2003

Equivalent to PTO/SB/06 (08-00)

Approved for use through 4/30/2003. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TAREQUÍCTION Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Under the Pape

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number 10/601,343

OTHER THAN

FOR NUMBER FILED NUMBER EXTRA	C	CLAIMS AS FILED - PART (Column 1)	(Column 2)	SMALL EN	1TITY
(37 CFR 1.16(a)) TOTAL CLAIMS (37 CFR 1.16(c)) INDEPENDENT CLAIMS (37 CFR 1.16(b)) TOTAL CLAIMS (37 CFR 1.16(b))	FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
(37 CFR 1.16(c)) INDEPENDENT CLAIMS (37 CFR 1.16(b)) 2 minus 3 = * 0 × \$43=					\$ <u>3</u>
(37 CFR 1.16(b))		17 minus 20 =	• 0	× \$ <u>9</u> =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) + \$=		2 minus 3 =	• 0	× \$ <u>43</u> =	
	MULTIPLE DEPENDENT	T CLAIM PRESENT (37 C	FR 1.16(d))	+ \$=	

SMALL ENTITY **NTE** FEE **RATE** FEE OR \$<u>385</u> \$_ OR x \$<u>9</u>= 0 OR × \$<u>43</u>= 0 0 OR \$385 **TOTAL** TOTAL

CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
DMI	Total (37 CFR 1.16(c))	* 13	Minus	** 20	= 0
EN	Independent (37 CFR 1.16(b))	* 1	Minus	*** 3	= 0
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	× \$ <u>9</u> =	0	OR	× \$=	
	× \$ <u>43</u> =	0	OR	× \$=	
F	· \$=	0	OR	+ \$=	·
	TAL D'L FEE	0	OR	TOTAL ADD'L FEE	

	_	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
M	Total (37 CFR 1.16(c))	*	Minus	**	=
	Independent (37 CFR 1.16(b))	*	Minus	***	=
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
× \$=		OR	× \$=	
× \$=		OR	× \$=	
+ \$=		OR	+ \$=	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
IΜα	Total (37 CFR 1.16(c))	*	Minus	**	=
EN	Independent (37 CFR 1.16(b))	*	Minus	***	=
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
x \$=		OR	x \$=	
× \$=		OR	× \$=	
+ \$=		OR	+ \$=	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	, and the second

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If the difference in column 1 is less then zero, enter "0" in column 2